# **Hope For Kids’ – Training儿童的希望训练会**

# Request for Certification Form & Completed Semester Report

# **证书申请&学期结束报告**

**Kindly note:-**

**Churches are encouraged to complete and report every semester even when there are no trainees for certification. This helps EE to maintain a full record of the local church training for the purpose of statistics and in the interest of the church and the trainers who have committed themselves to the semester, despite no trainees being certified.**

**盼望各教会每学期无论有学员申请证书与否都请填写此表格，以作为EE和各教会以及其训练团队的训练记录。**

**KINDLY COMPLETE IN BLOCK LETTERS IN ENGLISH 请以英文大写书写**

|  |
| --- |
| **A. CHURCH DETAILS 教会资料** |
| **Name of Church****教会名字（英）:** |  |
| **Address****地址:** |  |
| **Telephone电话:** |  | **Period 周期:** | **From**由 **to**到 |
| **E-mail电邮:** |  | **Semester No学期:** |  |
| **Senior Pastor主任牧师:** |  | **Language语言:**  |  |
| *N/B. There is a cost of RM5/- for certification per candidate.注意：每份文凭需付费RM5.* |

|  |
| --- |
| B. Trainees FOR CERTIFICATION 申请文凭之学员 |
| **For EE Office Use** | **Name of Trainees who meet the certification requirements****姓名***（请写按照身份证全名）* | **Gen-der****性别** | **Year of Birth****出生年份** | **Atten-dance****出席** | **No. of** **OJTs****实习布道****总数** | **Activity Book Completed***(Please tick)**活动手册完成（打勾）* |
| ***(CERT NO.)****办公室**使用* | *(Full name as per I/C)****(中文文凭申请：请先写中文名，后英文名)******IF Chinese name is required in the certificate, please type the Chinese name first, followed by the English name)*** |  |  | *(No. of sessions attended)**(Max 12)**按出席节课计（最多12堂课）* | *(Each trainee to share a minimum of 4 times)**最少**分享4次* | **Oral GP****福音讲述** | **Crafts** **劳作** |
|  | 1. |  |  |  |  |  |  |
|  | 2. |  |  |  |  |  |  |
|  | 3. |  |  |  |  |  |  |
|  | 4. |  |  |  |  |  |  |
|  | 5. |  |  |  |  |  |  |
|  | 6. |  |  |  |  |  |  |
|  | 7. |  |  |  |  |  |  |
|  | 8. |  |  |  |  |  |  |
|  | 9. |  |  |  |  |  |  |
|  | 10. |  |  |  |  |  |  |
|  | 11. |  |  |  |  |  |  |
|  | 12. |  |  |  |  |  |  |

 *Page 1 of 4*

|  |
| --- |
| **C. Other Trainees who did NOT meet the requirements *(For record purposes only)*** **其他学员没有符合要求（仅作记录）** |
| **Name (Full name as per IC)****姓名** | **Year of Birth****出生年份** | **Gender (Male/Female)****性别** | **No. of OJTs** *(Minimum 4)***实习布道总数** (*最少4次)* |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4 |  |  |  |  |
| 5. |  |  |  |  |
| 6. |  |  |  |  |
| 7. |  |  |  |  |
| 8. |  |  |  |  |

|  |
| --- |
| D*.* EVALUATION OF EE’s EFFECTIVENESS IN THE CHURCH **评估三福课程在教会的培训果效** |
| How has EE impacted your church during this semester? 这学期的三福培训课程对教会产生了怎么样的影响？ General comments 请给于相关的意见 : |

|  |
| --- |
| E. OJT RESULTS 接触活动报告 |
|

|  |  |  |
| --- | --- | --- |
|  | **Gospel Story Shared已讲述福音** | **Gospel Story NOT Shared****未讲述福音** |
| **NO. OF PROSPECTS总计接触** | **Profession 决志** | **No Decision考虑** | **Assurance建立确据** | **Rejection拒绝** | **For Student 给学员范** | **Build Friendship Only只建立友清** | **Not interested****没兴趣** | **Already Saved****已得救** | **Follow-up*栽培*** *(on earlier salvation cases)****已决志的朋友*** | **Other Reasons****其他原因** |
|  |  |   |   |   |   |   |   |   |   |   |

 |

*Page 2 of 4*

|  |
| --- |
| F. MATERIALS – Hope For Kids’ Student Set 材料-学生配套 |
| **Stock****存货** | **Date****日期** | **Quantity****数量** | **For EEM Office Use****办公室使用** |
| Sets received收到配套： |  |  |  |
| Sets used配套使用： |  |  |  |
| Balance存货： |  |  |  |
| Next semester sets requested下一个训练需求**:***(these materials will be sent with the certs**连同文凭一起邮寄)* |  |  |  |

**Note**: You will need to keep both Surveys (Activity Book page 31 & 32) given in Week 2 & 12, and the child’s answers to be typed into an excel file EE Malaysia will provide. We need this file for our reports.

注意：你需要保存两份调查表（活动手册页28-32），学生的答案必须报告给三福中心存档。(报告表由三福中心提供)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Senior Pastor 主任牧师签名 Date 日期

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Submitting Hope For Kids Teacher/ Trainer Submission Date 呈交日期

呈报老师签名

Name姓名: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email电邮: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address地址: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Handphone手机: \_\_\_\_\_\_\_\_\_\_ Office Tel办事处电话: \_\_\_\_\_\_\_\_\_\_\_\_\_

*Page 3 of 4*

**G. TEACHERS & TEAM LEADERS RECORD (老师与队长记录)**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Full Name (as per IC)****姓名** | **Designation*****(Rev/Pastor/******Elder/Dr/Mr/******Mrs/Ms)*****称呼** | **Role in this Semester****学期角色** | **No. of OJTs****实习布道总数** | **Gender(Male/****Female)****性别** | **Year of Birth****出生年份** | **Contact Tel****联络电话** | **Email****电邮** | **Church****教会** |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |  |

 Page 4 of 4